1	1 ITU IT\	Allom	ey Docket No.			K2020.0003/P003						
			nventor			Kunio Moriyama						
	PATENT APPLICATION		l		_	•						
ı	TRANSMITTAL	Title	PA	RTI	CLE B	AM THERAPY SYSTEM						
I	(Only for new nonprovisional applications under 37 CFR 1.53(b))											
L	Expres			l Lab								
Ī					MS Patent Application							
l	APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
İ	1. X Fee Transmittal Form (e.g., PTO/SB/17)		7. CD-ROM or CD-R in duplicate, large table or									
l	(Submit an original, and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27.				8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)							
l	3. X Specification [Total Pages 82	]	a. Computer Readable Form (CRF)									
I	(preferred arrangement set forth below) - Descriptive title of the invention	_		b. S	pecification	on Sequence Listing on:						
ı	- Cross Reference to Related Applications				i.	CD-ROM or CD-R (2 copies); or ii. Paper						
I	<ul> <li>Statement Regarding Fed sponsored R &amp; D</li> <li>Reference to sequence listing, a table, or a computer program listing appendix</li> </ul>			c. Statements verifying identity of above copies								
l	Background of the Invention     Brief Summary of the Invention		ACCOMPANYING APPLICATION PARTS									
l	Brief Description of the Drawings (if filed)     Detailed Description	9. Assignment Papers (cover sheet & document(s))										
١	- Detailed Description - Claim(s) - Abstract of the Disclosure  4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 19]				10. 37 CFR 3.73(b) Statement Power of Attorney							
					11. English Translation Document (if applicable)							
l	5. Oath or Declaration [Total Sheets ]				12. X Information Disclosure X Copies of IDS Statement (IDS)/PTO-1449 X Citations							
ı	a. Newly executed (original or copy)		13.			ary Amendment						
l	b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)			14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)								
	i. DELETION OF INVENTOR(S)			15. X Certified Copy of Priority Document(s) (if foreign priority is claimed)								
l	Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.								
ı			17.	$\sqrt{x}$	Other:	Claim for Priority and Submission of						
	6. Application Data Sheet. See 37 CFR 1.76			لت		Documents						
Ì	18. If a CONTINUING APPLICATION, check appropriate box, a	and supp	ly the i	requis	ite inform	nation below and in the first sentence of the						
	specification following the title, or in an Application Data Sheet ι	ınder 37	CFR 1	.76:								
Prior application information: Examiner  Art Unit:  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied												
1	under Box 5b, is considered a part of the disclosure of the acco	mpanyin	g conti	inuati	on or divi	isional application and is hereby incorporated by						
ŀ	reference. The incorporation <u>can only</u> be relied upon when a po 19. COR											
ſ	X Customer Number: 24998				X Correspondence address below							
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP												
Ŀ	Mark J. Thronson	TIINS	) N Y									
Į,	Address 2101 L Street NW											

Country US Telephone (202) 785-9700 Fax (202) 887-0689 Mark J. Thronson Name (Print/Type) Registration No. (Attorney/Agent) 33,082 Signature Date March 3, 2004

State

DC

Zip Code

20037-1526

City

Washington

PTO/SB/17 (10-03)
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CCC TDANCMITTAL	L	Complete if Known									
FEE TRANSMITTAL	· [	Application Number Not Yet Assigned									
for FY 2004		Filing Date				Concurrently Herewith					
	First Named Inventor					Kunio Moriyama					
Effective 10/01/2003, Patent fees are subject to annual revision.		Exam	iner Na	ame		Not Yet Assigned					
Applicant claims small entity status. See 37 CFR 1.27		Art Ur	nit			N/A					
TOTAL AMOUNT OF PAYMENT (\$) 1,172.00		Attorney Docket No. K2020.0003/P003									
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)									
Credit Money											
Check X Card Order Other None	3. 4	3. ADDITIONAL FEES									
X Deposit Account:	١.										
Deposit Account 04-1073	Fee	_arge Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Fee									
Number 04-1073	Code	(\$)	Code	(\$)		Fee Desc	ription	Fee Paid			
Deposit Account Dickstein Shapiro Morin &	1051	130	2051	65	Surcharge -	arge – late filing fee or oath					
Name Oshinsky LLP	1052	50	2052	25		- late provisio	onal filing fee or cover				
The Director is authorized to: (check all that apply)					sheet.						
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	lish specification					
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a re	a request for ex parte reexamination					
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Examiner ad	ing publication of SIR prior to					
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting Examiner ac	ng publication of SIR after					
FEE CALCULATION	1251	110	2251	55		or reply within					
1. BASIC FILING FEE	1252	420	2252	210	Extension fo	or reply within					
Large Entity Small Entity	1253	950	2253	475	Extension fo	or reply within	third month				
Fee Fee Fee Fee Description Fee Paid  Code (\$) Code (\$)	1254	1,480	2254	740	Extension fo	or reply within	n fourth month				
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255	1,005	Extension fo	r reply within	n fifth month				
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Ap						
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief	f in support o	f an appeal				
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for	oral hearing					
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to in	to institute a public use proceeding					
SUBTOTAL (1) (\$) 770.00	1452	110	2452	55	Petition to re	n to revive – unavoidable					
(ψ) 770.00	1453	1,330	2453	665	Petition to re	ion to revive - unintentional					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue	ssue fee (or reissue)					
Extra Fee from  Claims below Fee Paid	1502	480	2502	240	Design issue	e fee					
Total Claims 28 -20** = 8 x 18.00 = 144.00	1503	640	2503	320	Plant issue f	fee					
Independent 6 -3** = 3 x 86.00 = 258.00	1460	130	1460	130	Petitions to	the Commiss	sioner				
Multiple Dependent =	1807	<b>50</b> .	1807	50	Processing t	fee under 37	CFR 1.17(q)				
Large Entity Small Entity	1806	180	1806	180	Submission	on of Information Disclosure Stmt					
Fee Fee Fee Fee Fee Description	8021	40	8021	40			ssignment per				
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20							of properties) final rejection	$\vdash$			
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 ČFR 1.1	29(a))					
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		ditional inver 37CFR 1.129					
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	-		(xamination (RCE)				
over original patent	1802	900	1802	900	xamination						
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Other	of a design application  Other fee (specify)									
SUBTOTAL (2) (\$) 402.00		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00									
**or number previously paid, if greater; For Reissues, see above											
SUBMITTED BY (Complete (if applicable))											
Name (Print/Type) Mark J. Thronson		ration No. 33,082 Telephone (202) 775-474					(202) 775-4742				
Signature / MA		Date March 3, 200									